CLEARVIEW NORTH 199 HOME ROAD

JUNEAU		5	3039	Phone:	(920)) 386-3
Operated	from	1/1	To 12/31	Days	of	Operati

3400 Ownership: County ion: 365 Highest Level License: Skilled Operate in Conjunction with Hospital? No Operate in Conjunction with CBRF? No Number of Beds Set Up and Staffed (12/31/05): 117 Title 18 (Medicare) Certified? Yes Total Licensed Bed Capacity (12/31/05): 117 Title 19 (Medicaid) Certified? Yes Number of Residents on 12/31/05: 107 Average Daily Census: 97

Age, Gender, and Primary Diagnosis	of Residents (12/	31/05)		Length of Stay (12/31/05)	%
Primary Diagnosis	8	Age Groups 	%	 Less Than 1 Year 1 - 4 Years	43.0
Developmental Disabilities	0.0	Under 65	34.6	More Than 4 Years	29.0
Mental Illness (Org./Psy)	36.4	65 - 74	22.4	İ	
Mental Illness (Other)	29.9	75 – 84	29.9	İ	100.0
Alcohol & Other Drug Abuse	0.0	85 – 94	8.4		
Para-, Quadra-, Hemiplegic	0.0	95 & Over	4.7	Full-Time Equivalent	
Cancer	0.0			Nursing Staff per 100 Resid	lents
Fractures	0.0		100.0	(12/31/05)	
Cardiovascular	0.0	65 & Over	65.4		
Cerebrovascular	4.7			RNs	8.1
Diabetes	0.0	Gender	%	LPNs	13.9
Respiratory	0.0			Nursing Assistants,	
Other Medical Conditions	29.0	Male	43.0	Aides, & Orderlies	71.2
		Female	57.0	İ	
	100.0			j	
			100.0	j	

Method of Reimbursement

		edicare			edicaid itle 19			Other		:	Private Pay	!		amily Care			anaged Care			
Level of Care	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	Total Resi- dents	Of
Int. Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Skilled Care	2	100.0	244	77	82.8	119	0	0.0	0	7	58.3	250	0	0.0	0	0	0.0	0	86	80.4
Intermediate				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Limited Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care							0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care							0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled				1	1.1	175	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	1	0.9
Traumatic Brain In	j 0	0.0	0	15	16.1	620	0	0.0	0	5	41.7	824	0	0.0	0	0	0.0	0	20	18.7
Ventilator-Depende	nt 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	2	100.0		93	100.0		0	0.0		12	100.0		0	0.0		0	0.0		107	100.0

CLEARVIEW NORTH

Admissions, Discharges, and		Percent Distribution	n of Residents'	Condit	ions, Services, an	d Activities as of 12/	31/05
Deaths During Reporting Period							
					% Needing		Total
Percent Admissions from:		Activities of	8	As	sistance of	% Totally	Number of
Private Home/No Home Health	4.0	Daily Living (ADL)	Independent	One	e Or Two Staff	Dependent	Residents
Private Home/With Home Health	0.0	Bathing	1.9		48.6	49.5	107
Other Nursing Homes	20.0	Dressing	10.3		71.0	18.7	107
Acute Care Hospitals	16.0	Transferring	35.5		52.3	12.1	107
Psych. HospMR/DD Facilities	21.3	Toilet Use	15.9		61.7	22.4	107
Rehabilitation Hospitals	36.0	Eating	16.8		57.9	25.2	107
Other Locations	1.3	*******	******	*****	*****	* * * * * * * * * * * * * * * * * * * *	*****
Total Number of Admissions	75	Continence		%	Special Treatmen	ts	%
Percent Discharges To:		Indwelling Or Extern	nal Catheter	3.7	Receiving Resp	iratory Care	8.4
Private Home/No Home Health	33.3	Occ/Freq. Incontiner	nt of Bladder	69.2	Receiving Trac	heostomy Care	0.9
Private Home/With Home Health	1.6	Occ/Freq. Incontiner	nt of Bowel	58.9	Receiving Suct	ioning	0.9
Other Nursing Homes	11.1				Receiving Osto	my Care	11.2
Acute Care Hospitals	11.1	Mobility			Receiving Tube	Feeding	11.2
Psych. HospMR/DD Facilities	3.2	Physically Restraine	ed	33.6	Receiving Mech	anically Altered Diets	43.9
Rehabilitation Hospitals	0.0	į				_	
Other Locations	0.0	Skin Care			Other Resident C	haracteristics	
Deaths	22.2	With Pressure Sores		1.9	Have Advance D	irectives	62.6
Total Number of Discharges		With Rashes		9.3	Medications		
(Including Deaths)	63	İ			Receiving Psyc	hoactive Drugs	88.8

Selected Statistics: This Facility Compared to All Similar Urban Area Facilities & Compared to All Facilities

************	*****	*****	*****	*****	*****	*****	*****	*****	*****
	Ownership			Bed	Size:	Lic	ensure:		
	This	This Government			-199	Ski	lled	Al	1
	Facility	Peer	Group	Peer	Group	Peer	Group	Faci	lities
	%	%	Ratio	%	Ratio	%	Ratio	%	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	82.9	85.3	0.97	88.8	0.93	88.3	0.94	88.1	0.94
Current Residents from In-County	48.6	56.6	0.86	81.0	0.60	70.5	0.69	77.6	0.63
Admissions from In-County, Still Residing	18.7	29.1	0.64	23.7	0.79	20.5	0.91	18.1	1.03
Admissions/Average Daily Census	77.3	66.2	1.17	124.7	0.62	123.5	0.63	162.3	0.48
Discharges/Average Daily Census	64.9	66.9	0.97	127.4	0.51	126.7	0.51	165.1	0.39
Discharges To Private Residence/Average Daily Census	22.7	21.0	1.08	53.4	0.42	50.1	0.45	74.8	0.30
Residents Receiving Skilled Care	80.4	88.8	0.90	96.8	0.83	94.1	0.85	92.1	0.87
Residents Aged 65 and Older	65.4	87.7	0.75	92.1	0.71	92.5	0.71	88.4	0.74
Title 19 (Medicaid) Funded Residents	86.9	77.3	1.12	68.7	1.26	70.2	1.24	65.3	1.33
Private Pay Funded Residents	11.2	16.6	0.67	18.5	0.60	19.0	0.59	20.2	0.56
Developmentally Disabled Residents	0.0	0.5	0.00	0.4	0.00	0.5	0.00	5.0	0.00
Mentally Ill Residents	66.4	47.5	1.40	38.6	1.72	37.2	1.78	32.9	2.02
General Medical Service Residents	29.0	18.8	1.54	24.6	1.18	23.8	1.22	22.8	1.27
Impaired ADL (Mean)	54.8	43.6	1.26	48.5	1.13	47.2	1.16	49.2	1.11
Psychological Problems	88.8	67.7	1.31	57.4	1.55	58.9	1.51	58.5	1.52
Nursing Care Required (Mean)	11.0	8.2	1.34	7.1	1.54	7.1	1.54	7.4	1.48